Community Pathways – Revised Draft Proposal

Service Type: Other	
Service (Name): Skilled Nursing	
Alternative Service Title: NURSE CASE MANAGEMENT ANI	DELEGATION SERVICES
(CM/DN)	
HCBS Taxonomy:	
Check as applicable	
Service is included in approved waiver. There is no chang	
Service is included in approved waiver. The service spec	ifications have been modified
X Service is not included in the approved waiver	

Service Definition:

- A. Nurse Case Management and Delegation Services provides participants a licensed Registered Nurse (the "RN Case Manager & Delegating Nurse" or "RN CM/DN") who: (1) provides health case management services (as defined below); and (2) delegates nursing tasks for an unlicensed individual to perform acts that may otherwise be performed only by a RN or Licensed Practical Nurse (LPN), as appropriate and in accordance with applicable regulations.
- B. At a minimum, Nurse Health Case Management services includes:
 - 1. Performance of a comprehensive nursing assessment of the participant identifying his or her health, medical appointment, and nursing needs;
 - 2. Review of the Health Risk Screening Tool (HRST) at Level 3 or above, both on an annual basis and when any significant changes in the health of the participant occurs, to assist the participant to understand his or her health needs and to develop a plan for obtaining health services in the community;
 - 3. Completion of the Medication Administration Screening Tool, both on an annual basis and when any significant changes in the health of the participant occurs, to determine the level of support needed for medication administration;
 - 4. Review the participant's health services and supports to promote quality client outcomes and cost effective care according to the Maryland Board of Nursing regulations;
 - 5. Providing recommendations to the participant, caregivers under delegation of the RN, and the team for health care services that are available in the community;
 - 6. Communicating with the participant and his or her person-centered planning team members in order that the team can coordinate services and supports to meet the participant's health needs;
 - 7. Develop health care plans and protocols, as needed, that direct the paid direct support staff in the provision of health services to be performed that include (a) administration of medications, (b) performance of medical and nursing treatments, (c) activities of daily living (ADL) performance, and (d) identifying and intervening in an emergency;

- 8. Completes training, supervision, evaluation and remediation on all health services provided under the delegation of the RN by the paid staff as identified in the Nursing Care Plans:
- 9. Monitoring services delivered under delegation of the RN by direct support staff for compliance with the Nursing Care Plan; and,
- 10. Monitoring health data obtained by direct support staff under the delegation of the RN and as directed in the Nursing Care Plan.

C. Delegation of Nursing Tasks services includes:

- 1. Assessment of (a) the needs and abilities of the participant; (b) direct care staff performance of delegated nursing tasks; and (c) the environment of service or care delivery;
- 2. Delegation of the performance of nursing tasks (*i.e.*, acts of a licensed nurse that include medication administration and treatment administration) to unlicensed direct care staff that may be Certified Medication Technicians ("CMT"), Certified Nursing Assistant ("CNA"), or other Unlicensed Assistive Personnel ("UAP") in accordance with applicable Maryland Board of Nursing regulations;
- Training, supervision, and remediation of unlicensed direct care staff who provide health services under the delegation of the RN. (e.g., administration of medication, treatments, and Activities of Daily Living (ADL) care, health monitoring) as required by applicable Maryland Board of Nursing regulations; and,
 Provision of On-Call service, to paid direct support staff who are performing delegated
- 4. Provision of On-Call service, to paid direct support staff who are performing delegated nursing tasks, while delegation is occurring, for up to 24 hours per day, 365 days per year as required by applicable Maryland Board of Nursing regulations.
- D. In provision of Nurse Health Case Management and Delegation Services, the RN CM/DN will collaborate with the DDA licensed provider agency or Self-Directed Service participant in the development of policies and procedures required for delegation of any nursing tasks in accordance with COMAR 10.27.11.

SERVICE REQUIREMENTS:

- A. A participant may qualify for this service if he or she is either: (1) receiving services via the Traditional Services delivery model at a DDA-licensed community provider site, including but not limited to residential, day, or employment services or; (2) receiving Personal Support services; or (3) enrolled in the Self-Directed Services Program.
- B. A participant cannot qualify for or receive this service if the participant is in a placement where nursing services are provided as part of the services, including but not limited to a hospital, a nursing or rehabilitation facility or when Rare and Expensive Medicine (REM) is providing staff for the provision of nursing and health services.
- C. In order to access services, the following criteria must be met:
 - 1. Participant's health conditions must be determined by the RN CM/DN to meet delegation criteria (be chronic, stable, routine, predictable and uncomplicated) and nursing tasks are assessed to be eligible for delegation as per the Maryland Board of Nursing regulations COMAR 10.27.11;

- 2. Participant must require delegation as assessed by the RN as being unable to perform his or her own care. This includes the use of the Medication Administration Screening Tool to determine the need for delegation of medication.
- 3. The RN CM/DN has determined that all tasks and skills required to be performed or assisted with are delegable and the interval of the RN CM/DN's assessment, training, and supervision allow for the safe delivery of delegated nursing services in accordance with Maryland Board of Nursing regulations, including but not limited to COMAR 10.27.11.03, 10.27.11.04, 10.27.11.05.
- D. Under this service: RN CM/DN must assess the participant and his or her staff, the environment, and care plan at least once every 45 days, or more often as indicated by the participant's health condition, in accordance with the Maryland Board of Nursing regulations including but not limited to COMAR 10.27.11. All resulting revisions, recommendations, remediation and training completed must be documented by the RN CM/DN.
- E. RN may delegate performance of nursing tasks to the participant's appropriately trained and/ or certified paid care givers which may include spouse, parent, legal guardian, siblings, adult children, and licensed provider agency staff. When the delegation is for medication administration, the paid caregiver must be a CMT.
- F. A relative, legal guardian, or legally responsible person, as defined in Appendix C-2, may not be paid to provide Nurse Case Management and Delegation Services.
- G. Prior to accessing DDA funding for this service, all other available and appropriate funding sources, including but not limited to those offered by Maryland Medicaid State Plan, Division of Rehabilitation Services ("DORS"), State Department of Education, and Department of Human Services, must be explored and exhausted. These efforts must be documented in the participant's file.
- H. To the extent that any listed services are covered under the Medicaid State Plan, the services under the waiver would be limited to additional services as allowed and not otherwise covered under the Medicaid State Plan, but consistent with waiver objectives of avoiding institutionalization.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

The frequency of assessment is minimally every 45 days but may be more frequent based on the MBON 10.27.11 regulation and the prudent nursing judgment of the delegating RN in meeting conditions for delegation. This is a person centered assessment and evaluation by the RN that determines duration and frequency of each assessment.

X	<u>ce Delivery Method (check each that applies)</u> Participant Directed as specified in Appendix E
X	Provider Managed
<u>Speci</u>	fy whether the service may be provided by (check all that applies): Legally Responsible Person
<u>Speci</u>	fy whether the service may be provided by (check all that applies): _Legally Responsible Person _Relative

Provider Specifications: (Instructions list the following for each type of provider that can deliver the services):

Provider Category	Provider Type Title
Individual	Individual – for self-directed services
Agency	DDA Licensed Services Provider

Provider Category: Individual

Provider Type: Individual for participants Self-Directing Services

Provider Qualifications License (specify):

License (specify):

Certificate (specify):

Other Standard (specify):

The following minimum standards are required of the RN:

- 1. Be employed by or under contract with the Participant or Licensed Service Provider providing the direct support staff;
- 2. Possess valid Maryland and/or Compact Registered Nurse license;
- 3. Successful completion of the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation;
- 4. Pass a criminal background investigation and any other required background checks and credential verifications as provided in Appendix C-2-a;
- 5. Be active on the DDA registry of DD RN CM/DNs;
- 6. Complete the online HRST Rater and Reviewer training;
- 7. Attend mandatory DDA trainings; and
- 1. 8. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year

Verification of Provider Qualifications Entity

Responsible for Verification:

• Fiscal Management Services Provider

Frequency of Verification:

• Prior to service delivery and annually thereafter

Provider Category: Agency

Provider Type: DDA Approved Services Provider

Provider Qualifications License (specify):

License (specify):

Certificate (specify):

Other Standard (specify):

DDA Approved Services Provider

Registered Nurse must:

- 1. Be employed or under contract with the Licensed Service Provider;
- 2. Possess valid Maryland and/or Compact Registered Nurse license;
- 3. Successfully complete the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation:
- 4. Pass a criminal background investigation and any other required background checks and credential verifications as provided in Appendix C-2-a;
- 5. Be active on the DDA registry of DD RN CM/DNs;
- 6. Complete the online HRST Rater and Reviewer training;
- 7. Attend mandatory DDA trainings; and
- 8. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year

Verification of Provider Qualifications Entity

Responsible for Verification:

- DDA for verification of approved provider
- Providers for verification of Registered Nurse licenses, certifications, and training

Frequency of Verification:

- DDA prior to service delivery and annually thereafter
- Providers prior to service delivery and annually thereafter